FE6AN026

2011 AUG - 1 AH 10: 22

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

| NAME OF COMMITTEE (in full)  |   |   | TYPE OR PRINT ▼    |                          |                      | mple: If typi<br>r the lines.   | ing, type     | 12FE4M5          |                |                                       |  |
|--|---|---|--------------------|--------------------------|----------------------|---|---------------|------------------|----------------|---------------------------------------|--|
| GRANITE OATH PAC   |   |   |                    |                          |                      |   |               |                  |                |                                       |  |
|  |   |   |                    |                          |                      |   |               |                  |                |                                       |  |
| ADDRESS (number and street)  |   |   | 4,3                | NORTH                    | /                    | REET  | <u> </u>      | 1 1              | 1 1 1 1        |                                       |  |
| Check if different than previously reported. (ACC)   |   |   |                    |                          |                      |   | <u> </u>      |                  |                |                                       |  |
|  |   |   | [ G O <sub>1</sub> | NCORD                    |                      | 1 1 1 1   | لللا          | N <sub>1</sub> H | 0,330          | 1 -                                   |  |
| 2.   | FEC ID  | ENTIFICATION N  | JMBER              |                          | STATE ▲ ZIP CODE ▲   |   |               |                  |                |                                       |  |
|  | Co  | 0 4 9 1 4   | 7 2                |                          | 3. IS THIS<br>REPORT | \$4 \$9   | NEW<br>(N) OR |                  | AMENDED<br>(A) |                                       |  |
| 4.   | . TYPE OF REPORT (Choose One)  (a) Quarterly Reports: |   | `´F                | Monthly leport under On: | Feb 20 (M2)          | Special<br>Special  | May 20 (M5)   |                  | Aug 20 (M8)    |                                       | Nov 20 (M11)<br>(Non-Election<br>Year Only)<br>Dec 20' (M12) |
|  |   |   |                    | oue On:                  | Mar 20 (M3)          | ilest.  | Jun 20 (M6)   | 14.2<br>1887 - 1 | Sep 20 (M9)    | 10 m                                  | (Non-Election<br>Year Only)                                  |
|  | :<br>} !:   | April 15<br>:: Quarterly Report (0  | 21)                | <u> </u>                 | Apr 20 (M4)          | iberé   | Jul 20 (M7)   | . Ú              | Oct 20 (M10)   | · · · · · · · · · · · · · · · · · · · | Jan 31 (YE)  |
|  |   | July 15   | (0                 | ) 12-Day<br>PRE-Election | on Control           | Primary (12)  | ' '           | Ger<br>          | neral (12G)    | 7.1                                   | Runoff (12R)   |
|  | r" i  | Quarterly Report (C<br>October 15   | 12)                | Report for t             | he:                  | Convention  | 12C) Spec     |                  | ecial (12S)    | ıl (12S)                              |  |
|  |   | Quarterly Report (C   |                    | ı                        | Election on          | TM N /  | D 0 /         |                  | :              | in the<br>State o                     | rren i garin.<br>f   |
|  | X   | Year-End Report (\) July 31 Mid-Year Report (Non-election Year Only) (MY) | 10                 | ) 30-Day<br>POST-Elec    | ion                  | Suppression of the second seco |               | Runoff (30R)     |                | Special (30S)                         |  |
|  |   | Termination Report (TER)  |                    | Report for t             | he:<br>Election on   |   | 0 0 /         | ****             |                | in the<br>State o                     | f Europe   |
| 5.   | Covering  | Period 0  | 1) (               | 1 2                      | 0,1,1                | through   | 0 6           | 3                |                | 7 (7<br>1 1 5                         |  |
| I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  |   |   |                    |                          |                      |   |               |                  |                |                                       |  |
| Signature of Treasurer  Date  Date  Type or Print Name of Treasurer  Date  Dat |   |   |                    |                          |                      |   |               |                  |                |                                       |  |
| NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.   |   |   |                    |                          |                      |   |               |                  |                |                                       |  |
| L  | U   | fice<br>se<br>nly   |                    |                          |                      |   |               |                  |                | FOR<br>Rev. 12/2                      |  |